

California Code of Regulations
Title 22. Social Security
Division 9. Prehospital Emergency Medical Services
Chapter 1.8. Training Standards for Use of the Automated External Defibrillator by
Non-Licensed or Non-Certified Personnel

Article 1. Definitions

§ 100031. Authorized Individual.

“Authorized individual” means any person, not otherwise licensed or certified to use the automated external defibrillator, who has met the training standards of this chapter, and has been issued a prescription for use of an automated external defibrillator on a patient not specifically identified at the time the physician’s prescription is given.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100032. Automated External Defibrillator.

“Automated external defibrillator” or “AED” means an external defibrillator capable of cardiac rhythm analysis which will charge and, with or without further operator action, deliver a shock after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia. These devices are known as fully or semi-automatic defibrillators.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100033. Cardiopulmonary Resuscitation.

“Cardiopulmonary resuscitation” or “CPR” means a basic emergency procedure for life support, consisting of artificial respiration and manual external cardiac massage.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100034. Internal Emergency Response System.

“Internal Emergency Response System” means a plan of action and responders within a facility to activate the “9-1-1” emergency system, and which provides for the access, coordination, and management of immediate medical care to seriously ill or injured individuals.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100035. Prescribing Physician.

“Prescribing physician” means a physician and surgeon, licensed in California, who issues a written order for the use of the automated external defibrillator to authorized individual(s), and who develops, implements, and maintains the medical control provisions specified in this chapter.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

Article 2. General Training Provisions

§ 100036. Application and Scope.

(a) Any physician and surgeon licensed in California may authorize an individual to apply and operate an AED on an unconscious, pulseless, patient who is apneic or has agonal respirations, only if that authorized individual has been successfully trained according to the standards prescribed by this chapter.

(b) The training standards prescribed by this chapter shall not apply to licensed, certified or other prehospital emergency medical care personnel as defined by Section 1797.189 of the Health and Safety Code.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100037. Eligibility for Training.

An individual shall be eligible for the training prescribed in this chapter if the person has been trained in CPR, and has demonstrated proficiency in CPR practices to the satisfaction of the prescribing physician.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

Article 3. Training Standards

§ 100038. Required Hours and Topics.

(a) The training shall consist of not less than four (4) hours, presented in two (2) sessions, preferably over a period of at least two days, and shall include the following topics and skills:

- (1) proper use, maintenance and periodic inspection of the AED;
- (2) the importance of:
 - (A) CPR,
 - (B) defibrillation,
 - (C) advanced life support,
 - (D) internal emergency response system;
- (3) overview of the local EMS system, including 9-1-1 access, and interaction with EMS personnel;

- (4) Assessment of an unconscious patient to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED;
- (5) information relating to defibrillator safety precautions to enable the individual to administer shock without jeopardizing the safety of the patient or the authorized individual or other nearby persons;
- (6) recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged;
- (7) rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary; and,
- (8) authorized individual's responsibility of continuation of care, such as the repeated shocks if necessary, and/or accompaniment to the hospital, if indicated, or until the arrival of more medically qualified personnel.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

Article 4. Medical Control

§ 100039. Medical Control.

(a) Before prescribing and authorizing the use of AED, the prescribing physician shall establish appropriate policies and procedures which shall include:

- (1) A description of the utilization of the AED, including written medical protocols which may include, but are not limited to, authorization of personnel, standing orders and case by case reviews.
- (2) provisions to comply with any local EMS agency's policies and procedures;
- (3) a mechanism for the training and testing of the authorized individual in the use of AED;
- (4) a mechanism that will assure the continued competency of the authorized individual to include periodic training, and skill proficiency demonstrations at least quarterly, monitored by either the prescribing physician, or his/her designee (which may be another authorized individual),
- (5) a method of medical control to include reviews of each incident of application and the recording of such, either by means of magnetic tape or other suitable storage; and,
- (6) the conditions for the rescission or termination of the authorization for the utilization of the AED.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

§ 100040. Testing.

In order for an individual to be authorized to use the AED, the individual shall pass a written and skills examination, to be determined by the prescribing physician, which tests the ability to assess and manage the specified conditions prescribed in Section 100038.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.

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§ 100041. Written Validation.

The prescribing physician shall issue to the authorized individual a written validation or other documented proof of the authorized individual's ability to use an AED.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code.